## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

BHT-3245-2

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                              |                                |              |                  |   | SMALL ENTITY TYPE      |    | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|--|---|------------------------------|--------------------------------|--------------|------------------|---|------------------------|----|-------------------------------|------------------------|
| TOTAL CLAIMS   |  |   | 16                           |                                |              |                  | RATE                                    | FEE                    |    | RATE                          | FEE                    |
| FOR  |  |   | NUMBER FILED                 |                                | NUMBER EXTRA |                  | BASIC FEE                               | 375.00                 | OR | BASIC FEE                     | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 6 minus 20=                  |                                | * \$         |                  | X\$ 9=                                  |                        | OR | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |  |   | minus 3 =  *                 |                                |              |                  | X42=                                    |                        | OR | X84=                          |                        |
| ML   | LTIPLE DEPEN                                   | DENT CLAIM P                              | RESENT                       |                                |              |                  | +140=                                   |                        | OR | +280≃                         |                        |
| * If   | the difference                                 | in column 1 is                            | less than zero, enter "0" in |                                |              | column 2         | TOTAL                                   |                        |    | TOTAL                         |                        |
| CLAIMS AS AMENDED - PART II  |  |   |                              |                                |              |                  |   | - August               |    | OTHER                         | THAN                   |
| (Column 1)   |  |   | (Column                      |                                |              | (Column 3)       | SMALL ENTITY                            |                        | OR | SMALL                         |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |                              | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA | RATE                                    | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                        | **                             |              | = .              | X\$ 9=                                  |                        | OR | X\$18=                        |                        |
|  | Independent                                    | *   | Minus                        |                                |              | =                | X42=                                    |                        | OR | X84=                          |                        |
| L_   | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DE                   | PENDENT                        | CLAIM        |                  | +140=                                   |                        | OR | +280=                         |                        |
|  |  | · ·                                       |                              | •                              | •            |                  | TOTAL<br>ADDIT. FEE                     |                        | OR | TOTAL<br>ADDIT. FEE           |                        |
| _  |  | (Column 1)                                |                              | (Colur                         |              | (Column 3)       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |    |                               |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                              | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA | RATE                                    | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                        | **                             |              | =                | X\$ 9=                                  |                        | OR | X\$18=                        |                        |
|  | Independent                                    | *   | Minus                        | ***                            | CLAIM        | =                | X42=                                    |                        | OR | X84=                          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                              |                                |              |                  | +140=                                   |                        | OR | +280=                         |                        |
|  |  |   |                              |                                |              |                  | TOTAL<br>ADDIT. FEE                     |                        | OR | TOTAL<br>ADDIT, FEE           |                        |
| _  |  | (Column 1)                                |                              | (Colum                         |              | (Column 3)       |   |                        |    |                               |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                              | HIGH<br>NUME<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA | RATE                                    | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                        | **                             |              | = ,              | X\$ 9=                                  |                        | OR | X\$18=                        | -                      |
|  | Independent                                    | *   | Minus                        | ***                            |              | =                | X42=                                    |                        |    | X84=                          |                        |
|  | FIRST PRESE                                    | NTATION OF M                              | JLTIPLE DE                   | PENDENT                        | CLAIM        |                  | A46=                                    |                        | OR | A04=                          |                        |
| , <b>*</b> 1   | f the entry in colu                            | +140=                                     |                              | OR                             | +280=        |                  |   |                        |    |                               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                              |                                |              |                  |   |                        |    |                               |                        |

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